SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 16 OF 45 (check only one)
		Detailed Summary Page	11a
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NAME OF COMMITTEE (In Full) Dirigo PAC			
Full Name of Individual (Last, First, Middle Initial American College of OB-GYNS PAC Mailing Address 409 12th St SW City Washington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify)	State DC Coo	Zip Code 20024-2125 0364158 upation (for Individual) Year-to-Date ▼ 5000.00	Date of Receipt M
Full Name of Individual (Last, First, Middle Initial Brownstein Hyatt Farber Schreck PAC Mailing Address 410 E 17th Ave Ste 2200 City Denver FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General Other (specify)	State CO Coo	Zip Code 80203 0390583 upation (for Individual) Year-to-Date ▼ 1000.00	Date of Receipt M
Full Name of Individual (Last, First, Middle Initial Mortgage Bankers Association PAC Mailing Address 1919 M Street NW 5th Floor City Washington FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary Other (specify)	State DC Coo	Zip Code 20036 2004812 upation (for Individual) Year-to-Date ▼ 5000.00	Date of Receipt Mo5
SUBTOTAL of Receipts This Page (optional)		<u>, </u>	11000.00
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